

Alyssa Black  
Chair, House Healthcare Committee  
Vermont State House  
115 State Street  
Montpelier, Vermont 05422-5301

Dear Chair Black and Members of the House Healthcare Committee (HHC):

The Agency of Human Services (AHS), the Green Mountain Care Board (GMCB), and the Office of the Health Care Advocate (HCA) support Section 10 of S.126 contingent upon the edits below. We believe that, with the adoption of the proposed edits, Section 10 of S.126 is in the best interests of Vermonters. Thank you for your consideration.

Sincerely,

s/ William Dempsey  
William Dempsey  
Health Data Officer  
Agency of Human Services

s/ Lindsay Kill  
Lindsay Kill  
Director of Health Systems Data & Analytics  
Green Mountain Care Board

s/ Eric Schultheis  
Eric Schultheis  
Staff Attorney  
Office of the Health Care Advocate

**Consensus Recommended Language of the Agency of Human Services, the Green Mountain Care Board, and the Office of the Health Care Advocate**

AS PASSED BY SENATE - S.126

VT LEG #382250 v.1

Sec. 10. 18 V.S.A. § 9353 is added to read:

**§ 9353. INTEGRATION OF HEALTH CARE DATA**

- (a) The Agency of Human Services shall collaborate with the Health Information Exchange Steering Committee in the development of Unified Health Data Space~~an integrated system of clinical and claims data~~ in order to improve patient, provider, and payer access to relevant information ~~and to reduce system costs and reduce administrative burdens on providers.~~
- (b) ~~The Agency's process~~The development of the Unified Health Data Space by the Agency shall:
  - (1) align with the statewide Health Information Technology Plan established pursuant to section 9351 of this title;
  - (2) utilize the expertise of the Health Information Exchange Steering Committee;
  - (3) incorporate appropriate privacy and security standards aligned with the best privacy and security interests of patients;
  - (4) determine how best to integrate clinical data, claims data, ~~and~~ data regarding social drivers of health and health-related social needs, and other data types;
  - (5) integrate clinical data, claims data, data regarding social drivers of health and health-related social needs, and other data types, or any subset thereof, only if a majority of the voting members of the Health Information Exchange Steering Committee votes that said integration should occur. As used in this subsection, the requirement that a majority of the Health Information Exchange Steering Committee votes to approve data integration means that a majority of voting members vote to approve a specific data integration and not just a majority of a quorum of voting members that may be present at a given meeting.
  - (6) limit the use of integrated data approved per subsection b(5) to the use-restrictions established by the Health Information Exchange

Steering Committee when they voted to approve the integration of said data;

- (7) ~~(5)~~ ensure interoperability among contributing data sources and applications to enable a Unified Health Data Space ~~that is usable by all stakeholders;~~
- (8) ~~(6)~~ identify the resources necessary to complete data linkages for clinical policy, health surveillance, population health management, and research usage, and data integration uses approved by the Health Information Exchange Steering Committee pursuant to (b)(5) and (b)(6);
- (9) ~~(7)~~ establish a timeline for setup and access to the integrated system;
- (10) ~~(8)~~ develop and implement a system that ensures rapid access for patients, providers, and payers; and
- (11) ~~(9)~~ identify additional opportunities for future development, including incorporating new data types and larger populations.

(c) ~~Health insurers, as defined in section 9402 of this title, shall provide clinical and claims data to the Agency of Human Services as directed by the Agency in order to facilitate the integrated system of clinical and claims data as set forth in this section.~~

(d) The Agency shall provide access to data to State agencies and health care providers as needed to support the goals of the Statewide Health Care Delivery Plan established pursuant to section 9403 of this title, once established, to the extent permitted by the data use agreements in place for each data set and subject to (b)(5).

(e) On or before January 15 annually, the Agency of Human Services shall provide an update to the House Committees on Health Care and on Human Services and the Senate Committee on Health and Welfare regarding the development and implementation of the integrated system of ~~clinical and claims~~ data in accordance with this section.

~~(e)(f)~~ A representative of the Green Mountain Care Board shall be a voting member of the Health Information Exchange Steering Committee.